

**BOARD OF REGISTERED NURSING**

P.O. BOX 944210, SACRAMENTO, CA 94244-2100
TDD (916) 322-1700
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**CALIFORNIA BOARD OF REGISTERED NURSING
GENERAL INSTRUCTIONS AND APPLICATION REQUIREMENTS
REGARDING CLINICAL NURSE SPECIALIST (CNS) CERTIFICATION**

GENERAL INSTRUCTIONS

I. General Application Requirements

Clinical Nurse Specialist certification eligibility requires the possession of a current, clear and active California RN license. The following must be submitted to the Board of Registered Nursing for Clinical Nurse Specialist certification purposes:

- 1. A completed Clinical Nurse Specialist Certification Application form (Pages 6 & 7).**
- 2. Clinical Nurse Specialist certification fee of \$75.00.**
- 3. One recent 2" x 2" passport type photograph.**
- 4. Required documentation to determine certification eligibility. Please refer to the application requirements for Clinical Nurse Specialist certification (Pages 4 & 5) and select the appropriate method by which to qualify.**

If you do not possess a current, clear and active California RN license and have never applied for a California RN license, an Application for California RN Licensure by Endorsement must also be submitted. If you have had a permanent California RN license, you must renew/reactivate the California RN license.

Clinical Nurse Specialist application fee is an earned fee; therefore, when an applicant is found ineligible the application fee is not refunded. Processing times for certification may vary, depending on the receipt of documentation from academic programs, associations/national organizations or evaluators. Processing a Clinical Nurse Specialist certification application indicating a conviction(s), disciplinary action(s) and/or voluntary surrender(s) may take longer. A pending application file is not a public record; therefore, an applicant must sign a release of information before the Board of Registered Nursing will release information to the public, including employers, relatives or other third parties. Once you are certified, your address of record must be disclosed to the public upon request. All requests for information are mandatory.

II. Name and/or Address Changes

California Code of Regulations, Section 1409.1 requires that you notify the Board of Registered Nursing of all name and address changes within thirty (30) days of any change. You may call the Board of Registered Nursing regarding the change of address of record. If you have changed your name, please submit a letter of explanation regarding the requested name change plus applicable documentation such as a copy of a marriage certificate, divorce decree or a driver's license.

GENERAL INSTRUCTIONS (CONT'D)

III. Social Security Number

Disclosure of your social security number is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405(c)(2)(C)) authorize collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Section 11350.6 of the Welfare and Institutions Code, or for verification of licensure, certification or examination status by a licensing or examination entity which utilizes a national examination and where licensure is reciprocal with the requesting state. If you fail to disclose your social security number, your application for initial or renewal of licensure/certification will not be processed. You will be reported to the Franchise Tax Board, who may assess a \$100 penalty against you.

IV. Reporting ALL Conviction(s), Discipline(s) and/or Voluntary Surrender(s) Against Licenses/Certificates

Applicants are required under law to report ALL misdemeanor and felony convictions. "Driving under the influence" convictions must be reported. Conviction(s) must be reported even if they have been expunged under Penal Code Section 1203.4 or even if a court ordered diversion program has been completed under the Penal Code or under Article 5 of the Vehicle Code. Also, all disciplinary action(s) and/or voluntary surrender(s) against an applicant's clinical nurse specialist, registered nurse, practical nurse, vocational nurse or other professional license/certificate must be reported.

Failure to report prior conviction(s), disciplinary action(s) and/or voluntary surrender(s) is considered falsification of application and is grounds for denial of licensure/certification or revocation of license/certificate.

When reporting prior conviction(s), disciplinary action(s) and/or voluntary surrender(s), **applicants are required to provide a full written explanation of:** circumstances surrounding the arrest(s), conviction(s), disciplinary action(s) and/or voluntary surrender(s); the date of incident(s), conviction(s), disciplinary action(s) and/or voluntary surrender(s); specific violation(s) (cite section of law, if convicted), court location or jurisdiction, sanctions or penalties imposed and completion dates. Certified copies of court documents or state board determinations/decisions should also be included.

NOTE: A certified copy of the arrest report may also be requested. Applicants must also submit a description of the rehabilitative changes in their lifestyle which would enable them to avoid future occurrences.

To make a determination in these cases, the Board of Registered Nursing considers the nature and severity of the offense, additional subsequent acts, recency of acts or crimes, compliance with court sanctions and evidence of rehabilitation.

The burden of proof lies with the applicant to demonstrate acceptable documented evidence of rehabilitation. Examples of rehabilitation evidence include, but are not limited to:

- Recent dated letter from applicant describing rehabilitative efforts or changes in life to prevent future problems.

GENERAL INSTRUCTIONS (CONT'D)

- Letters of reference on official letterhead from employers, nursing instructors, health professionals, professional counselors, parole or probation officers, or other individuals in positions of authority who are knowledgeable about your rehabilitation efforts.
- Letters from recognized recovery programs and/or counselors attesting to current sobriety and length of time of sobriety, if there is a history of alcohol or drug abuse.
- Proof of community work, schooling, self-improvement efforts.
- Court-issued certificate of rehabilitation or evidence of expungement, proof of compliance with criminal probation or parole, and orders of the court.

All of the above items should be mailed **directly** to the Board of Registered Nursing by the individual(s) or agency who is providing information about the applicant. Have these items sent to the Board of Registered Nursing, Licensing Unit – Advanced Practice Certification (CNS), P.O. Box 944210, Sacramento, CA 94244-2100.

It is the responsibility of the applicant to provide sufficient rehabilitation evidence on a timely basis so that a certification determination can be made.

An applicant is also required to immediately report, in writing, to the Board of Registered Nursing any conviction(s), disciplinary action(s) and/or voluntary surrender(s) which occur between the date the application was filed and the date that a California Clinical Nurse Specialist certificate is issued. Failure to report this information is grounds for denial of licensure/certification or revocation of license/certificate.

NOTE: The application must be completed and signed by the applicant under penalty of perjury.

V. Address Information

The Board of Registered Nursing's mailing address is:

Advanced Practice Unit – CNS Certification
Board of Registered Nursing
P. O. Box 944210, Sacramento, CA 94244-2100

The Board of Registered Nursing's street address for overnight mail is:

Advanced Practice Unit – CNS Certification
Board of Registered Nursing
400 R Street, Suite 4030, Sacramento, CA 95814-6200

GENERAL INSTRUCTIONS (CONT'D)

VI. California Nursing Practice Act

California statutes and regulations pertaining to Registered Nurses/Clinical Nurse Specialists may be obtained by contacting:

Procurement Publications Section
California Department of General Services
P. O. Box 1015, North Highlands, CA 95660

Document Number: 7540-957-1108-5 Fee: \$9.95
Telephone Number: (916) 574-2200 - No Telephone Orders Accepted

APPLICATION REQUIREMENTS FOR CLINICAL NURSE SPECIALIST (CNS) CERTIFICATION

METHOD ONE

Successful completion of a master's program with a clinical field of nursing which conforms with the standards set forth in the California Business and Professions Code Section 2838.2.

Documentation submitted directly to the Board of Registered Nursing:

1. Verification of the Completion of a Master's Degree in a Clinical Field of Nursing or Clinical Field Related to Nursing form submitted by the academic program. (Page 8)
2. Official transcripts for the completed master's program in a clinical field of nursing submitted by the academic program.
3. Verification of Clinical Nurse Specialist Clinical Experience form submitted by a valid verifier. (Page 10)

METHOD TWO

Certification by a national organization/association whose standards are equivalent to those set forth in the California Business and Professions Code Section 2838.2.

Documentation submitted directly to the Board of Registered Nursing:

1. Verification of the Completion of a Master's Degree in a Clinical Field of Nursing or Clinical Field Related to Nursing form submitted by the academic program. (Page 8)
2. Official transcripts for the completed master's program in a clinical field of nursing or clinical field related to nursing submitted by the academic program.
3. Verification of Clinical Nurse Specialist Certification by a National Organization/Association form submitted by the national organization/association. (Page 9)

Listed below are the national organization/associations that have met the Clinical Nurse Specialist certification requirements that are equivalent to the Board's standards for Clinical Nurse Specialist certification:

American Nurses Association - American Nurses Credentialing Center (ANCC)
600 Maryland Ave., SW, Suite 100 West, Washington, DC 20024-2571 (800) 284-2378

Oncology Nursing Certification Corporation
501 Holiday Dr., Pittsburgh, PA 15220-2749 (412) 928-8597

APPLICATION REQUIREMENTS FOR CLINICAL NURSE SPECIALIST (CNS) CERTIFICATION (CONT'D)

METHOD THREE

California Business and Professions Code Section 2838.2 defines a clinical nurse specialist (CNS) as a registered nurse with advanced education, who participates in expert clinical practice, education, research, consultation, and clinical leadership as the major components of his or her role.

All documentation submitted to the Board of Registered Nursing is for the purpose of validating your eligibility for clinical nurse specialist certification. Since your master's degree is related to nursing, you may qualify if you are able to demonstrate graduate course work in advanced nursing in the areas of expert clinical practice, consultation, clinical leadership, research and education. If your master's degree content included education, research and consultation content that is equivalent to a master's degree in a nursing curriculum, those courses may be listed.

The Verification of Required Advanced Nursing Component Areas to Meet the Requirements for Clinical Nurse Specialist (CNS) Certification form (Page 11) should be used to validate your advanced nursing competencies identified in the related courses for the advanced nursing education and practice. Please refer to Page 12 for an example of a completed form to evidence the course work validation for the five (5) advanced nursing component areas.

Documentation submitted directly to the Board of Registered Nursing:

1. Verification of the Completion of a Master's Degree in a Clinical Field of Nursing or Clinical Field Related to Nursing form submitted by the academic program. (Page 8)
2. Official transcripts for the completed master's program in a clinical field related to nursing submitted by the academic program.
3. Verification of Clinical Nurse Specialist Clinical Experience form submitted by a valid verifier. (Page 10) A valid verifier of CNS clinical experience is one who is knowledgeable about the CNS's roles and must have observed you performing the roles for the five (5) advanced nursing component areas. The person who has observed you only in your advanced practice setting in a field related to nursing (where you did not carry out the advanced nursing role) is not a valid verifier.
4. Submission of the Method 3 - Verification of Required Advanced Nursing Component Areas to Meet the Requirements for Clinical Nurse Specialist Certification form to detail the required five (5) advanced nursing component areas. (Page 11) Please refer to an example of a completed verification form. (Page 12)
5. Curriculum and course descriptions for the completed master's level course work in advanced nursing with accompanying official transcripts or certificate of completion.

**PLEASE REFER QUESTIONS RELATED TO THE METHOD THREE APPLICATION PROCESS
TO THE ADVANCED PRACTICE UNIT IN SACRAMENTO AT (916) 322-1988.**